

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-15-11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$363,063	5.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes in circular IL-2010-05.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

FILED

NOV 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Allied P&C Insurance Company
Name of Company

Marie T. Safreed, State Filing Specialist
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

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6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$405,569	5.0%

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**Change in Company's premium level which will result from application of new rates.

AMCO Insurance Company

Name of Company

Marie T. Safreed, State Filing Specialist

Official - Title

FILED

NOV 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

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8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$ -235,009	-24.5%

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*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Depositors Insurance Company

Name of Company

Marie T. Safreed, State Filing Specialist

Official - Title

FILED

NOV 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective October 1, 2011

(1)		(2)	(3)
Coverage		Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	\$1,982,590	5.0%
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): We are modifying our LCM by +6% and eliminating loss cost deviations for
certain classes.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

FILED

OCT 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Farmers Insurance Exchange
Name of Company

James J. Gebhard

James J. Gebhard, FCAS, MAAA
Actuary, Workers Compensation
Official - Title

FORM (RF-3)
SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective October 1, 2011

(1)		(2)	(3)
Coverage		Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	\$2,572,848	5.0%
	<u>Line of Insurance</u>		

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classes? If so, specify: NoBrief description of filing. (If filing follows rates of an advisory
organization, specify organization): We are modifying our LCM by +6% and eliminating loss cost deviations for
certain classes.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.**FILED**

OCT 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOISMid-Century Insurance Company
Name of Company*James J. Gebhard*
James J. Gebhard, FCAS, MAAA
Actuary, Workers Compensation
Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective October 1, 2011

(1)		(2)	(3)
Coverage		Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1.	Automobile Liability		
	Private Passenger		
	Commercial		
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	Private Passenger		
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6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Workers Compensation	\$6,449,175	5.5%
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: No

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organization, specify organization): We are modifying our LCM by +6% and eliminating loss cost deviations for
certain classes.

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** Change in Company's premium level which will
result from application of new rates.

FILED

OCT 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Truck Insurance Exchange
Name of Company

James J. Gebhard

James J. Gebhard, FCAS, MAAA
Actuary, Workers Compensation
Official - Title